

Behavioral Health Integration Stakeholder Advisory Group
Meeting Minutes
May 26, 2021

Stakeholder Advisory Group Members

Name	Affiliation/ Designation	Attendance
Gail Avent	Total Family Care Coalition	Present
Matt Biel	MedStar Health	
Robert Buck	Family Preservation Services, Inc.	
James Campbell	PSI	
Irma Clay	DC Metropolitan Foster and Adoptive Parent Association	Present
Tanya Covington	Consumer and Caregiver	
Dr. Beth Crawford	Maryland Family Resource	
Marc Dalton, MD, MPH	HSCSN Health Plan	Present
Sheandinita M. Dyson	McClendon Center	Present
Mark Fracasso, MD	MedStar Family Choice-DC	Present
Christine Golden	HSCSN Health Plan	Present
Sharra Greer	Children's Law Center	
Jean Harris	NAMI DC	
Sarah Hoffman	Children's National Hospital	Present
Donise Holley	Consumer and Former Caregiver	
Katrina Huey	Consumer	
Gayle Hurt	DC Hospital Association	Present
Rhonda Johnson	Certified Peer Specialist	Present
Mark LeVota	DC Behavioral Health Care Association	Present
Michele May	Deaf Reach, Inc.	
Dr. Yavar Moghimi	AmeriHealth Caritas DC	Present
Maria Nunez	Capital Clubhouse, Inc.	
Dr. Lavdena Orr	AmeriHealth Caritas DC	Present
Jenise Jo Patterson	Parent Watch Inc.	Present
Jennifer Pauk	Unity Health Care	
Michael Pickering	RAP, Inc.	Present
Shawnique Poole	Consumer	Present
Juanita Price	Hillcrest Children and Family Center	
Dr. Randy Pumphrey	Whitman-Walker Health	
Patricia Quinn	DC Primary Care Association	
Elizabeth Reddick	Consumer	
Christy Respress	Pathways to Housing	Present
Sabrina Richardson	Caregiver	
Eric Scharf	Depression and Bipolar Support Alliance	

Dr. Richard Schottenfeld	Howard University Hospital	
Senora Simpson	BH Planning Council/Caregiver	
John Smith	Prestige Healthcare	
Dr. Mario Testani	Beacon Health Options	Present
Fari Ghamina Tumpe	Consumer	
Karin Werner	La Clinica Del Pueblo	Present
Joan Williams	SOME	
Samuel Williams, MD	Magellan Health	Present
Karyn Wills, MD, CHIE	CareFirst CHPDC	
Joan Yengo	Mary's Center	
Alvin Hinkle	Department of Behavioral Health	
Maude Holt	Department of Health Care Finance	
Yolanda Lyles	Department of Aging and Community Living	
Thomas McQueen	Department of Health	Present
Angele Moss-Baker	Department of Behavioral Health	Present
Paul Scotman	Child and Family Services Agency	Present
Omotunde Sowole-West	Department of Health	Present
Kenan Zamore	Department of Health	

Additional District Government Attendees

Name	Office or Agency
Melisa Byrd	Department of Health Care Finance
Dr. Barbara J. Bazron	Department of Behavioral Health
Amelia Whitman	Department of Health Care Finance
Atiya Jackson	Department of Behavioral Health
Ellyon Bell	Department of Health Care Finance
Deniz Soyer	Department of Health Care Finance
Jennifer Joyce	Department of Health Care Finance

Public Attendees

Name	Role	Organization
Megan Thomas	Public	Aurrera Health Group
Karen Ostlie	Public	Catholic Charities
Jenneil Magpantay	Public	Aurrera Health Group

1. Welcome and Updates

Angele Moss-Baker, DBH

- Updates
 - Jean Harris with NAMI DC has been added as the consumer organization members of the executive committee.
 - The Stakeholder Advisory Group Charter was approved.
- Dr. Bazron thanked everyone for their participation on Stakeholder Advisory Group. The input from this group is very important and will help us ensure we are incorporating the input and knowledge of those on the ground in the decisions we are making.

2. Work Group Updates

Work Group Co-Chairs

- Some work groups have started meeting, while others are still scheduling their initial meetings.
3. Work Groups will utilize reporting template (shared later in the presentation) to report out on their topics and to allow the SAG to compile a final report.

Reporting Template

Work Group:

Topic:

Recommendations *(Please provide a 1-2 sentence description of 3-5 consensus recommendations from your work group related to this topic.):*

Behavioral Health Transformation Principles *(Please note the Behavioral Health Transformation Principle(s) that these recommendations address and briefly explain how they connect to the principles identified. The transformation principles are: Embrace a Population Health Framework; Provide Person-Centered Care; Ensure Parity; Improve Quality; Promote Health Equity; and Promote Value, Efficiency, and Coordination):*

Expected Impact *(Please summarize the expected impact of these recommendations or any other reasoning you wish to provide):*

Additional Opportunities for Consideration *(Please describe any additional opportunities that the District government should consider when developing plans related to this topic, as appropriate. This may include items on which the group could not achieve consensus or that the group did not feel warranted a full recommendation.):*

Additional Risks and Barriers for Consideration *(Please describe any additional risks and barriers that the District government should consider when developing plans related to this topic, as appropriate. This may include items on which the group could not achieve consensus or that the group did not feel warranted a full recommendation.):*

Attachments *(If there are attachments related to this topic that your Work Group would like to include with further details on the recommendations being made, please note those documents here):*

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- Expectations:
 - Approximately 4 hours/month of meetings
 - Potential work outside of meetings, as needed
 - DHCF/DBH staff liaison to be designated to provide staff support (forthcoming)
 - Each work group will receive a baseline presentation from the corresponding internal Work Stream lead.
- Key Topics for each Work Group

- Work Group 1 – Services to Carve-In
 - Case Management and Care Coordination
 - Services to Carve-In
 - Work Group 2 – MCO Contractual Considerations
 - Consistency in MCO Standards & Procedures
 - Permanent MCO Contract Policies
 - Short-term MCO Contract Policies (“Bridge Policies”)
 - MCO Preparedness and Transition
 - Work Group 3 – Beneficiary and Provider Education and Training
 - Provider Training and Technical Assistance Plan
 - Beneficiary Education and Communications Plan
 - Work Group 4 - Performance Measures and Population Monitoring
 - Provider Performance Measures
 - MCO Performance Measures
- a. Work Group 1 - Services to Carve-In
- Work Group 1 has held two two-hour meetings. The first focused on services to carve-in, which is the current priority because of the rate study. The group walked through the list of services, which fell into three categories.
 - Existing Services with no changes to service scope
 - Existing services with change of scope
 - New Services that should be under consideration
 - In first two meetings, the work group collected input from stakeholders regarding what they felt was high priority for the rate study.
 - Dr. Bazron asked whether rationale was included in the recommendations.
 - Dr. Moghimi indicated that there was discussion that was captured in the meeting minutes.
 - Dr. Bazron indicated that it would be helpful to leadership if rationale was included.
 - The second topic discussed was care coordination and case management
 - There was a fairly uniform feeling that peer support services should be standalone services to broaden it
 - A lot of providers were concerned about unique identifiers for billing codes and distinctions
 - Dr. Bazron noted that discussions on place of service are completed, the work group should think about evidence-based practices specifically as some of them have very specific requirements regarding place of services. In some cases, CMS also has requirements.

- Next meeting will be on June 16, when the work group will be looking at management of local dollars and resources and continuing conversation around care coordination and case management.
- b. Work Group 2 – MCO Contractual Considerations
 - Work Group 2 is working to schedule their first meeting. It has been delayed due to
- c. Work Group 3 – Beneficiary and Provider Education and Training
 - Work Group 3 co-chairs will be meeting with their liaison to start scheduling soon.
- d. Work Group 4 - Performance Measures and Population Monitoring
 - Work Group 4 has had two meetings to discuss performance measures and population monitoring.
 - They have not moved towards making recommendations yet. Travis Auth, Work Stream 4 lead, gave a presentation to share current thinking.
 - Work Group 4 has noted the importance of considering special populations, including pregnant women, returning citizens and children.
 - They also discussed the need to address IT and data sharing agreements so MCOs, provider organizations, and other stakeholders are able to communicate effectively and can share information in efficient and effective ways.
 - The Work Group looked at two approaches to collaborative care – focused on making sure strengthening areas that we know need improvement. Other care approaches were discussed as well.
 - They also discussed the importance of tracking social and informal supports – recognizing community resources that are not health care resources, but also connect people to health care resources

4. Public Comment

Members of the Public

5. Next Steps and Adjournment

Angele Moss-Baker, DBH